Docket	No.	
Docket	INO.:	

## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on

ne invention en	iitiea:					
ACTIVE	ELECTRONIC	DEVICE AND E	LECTRONIC	APPARATUS	3	
lescribed and cl	aimed in the specif	ication:				
<b>*</b> a.	■ attached here	to.				
b.	filed on	as	s Application	Serial No	···	and
	amended on					
claims, as ameno I ack	ded by any amendr nowledge the duty	nent referred to abo	ove. Office all in		-	plication, including the
Unde provisional appl	er Title 35 U.S. Co ication(s) filed with	de § 119, the prionin one year prior to	rity benefits of this applicat	of the following ion are hereby c	foreign application( laimed:	s) and/or United States
Japanes	se Patent Applica	ation No. 2002-3	56610, filed	on December	r 9, 2002	
he United State	es of America eith	on(s) for patent or ner (a) more than cation(s) and/or Un	one year price	or to this applic	cation, or (b) before	in countries foreign to the filing date of the
I here his application :	and to transact all l James A Kirk M.	ousiness in the Pate A. Oliff, Reg. No. 2 Hudson, Reg. No.	ent and Trader 7,075; Willian 27,562; Thom	nark Office: m P. Berridge, R nas J. Pardini, R	Reg. No. 30,024; Reg. No. 30,411;	revocation to prosecute
	Edward Mario A. Costai	P. Walker, Reg. No. atino, Reg. No. 33,	o. 31,450; Ro 565; and Card	bert A. Miller, Foline D. Dennisc	Reg. No. 32,771; on, Reg. No.34,494.	
ALL CORRES BERRIDGE, P.0	PONDENCE IN O. BOX 19928, AI	CONNECTION LEXANDRIA, VIR	WITH THIS RGINIA 2232	APPLICATIO 0, TELEPHONI	ON SHOULD BE E (703) 836-6400.	SENT TO OLIFF &
nerein of my ov further that these by fine or impr	wn knowledge are e statements were isonment, or both	true and that all s made with the kno	tatements ma wledge that v 001 of Title	ide on informati villful false state 18 of the Unite	ion and belief are b ements and the like s ed States Code and	hat all statements made elieved to be true; and so made are punishable that such willful false
	•					
Typewritten Full	l Name	Kazunori			ANIA	ZAWA
of Sole or First i	nventor:	Given Name		Middle Initial		mily Name
**Inventor's Sig	mature:	Given Name	N	madie minai		-
**Date of Signar		<u>Xazun</u>	10 200		Hnaz	awa
Date of Signa	ture:	Novembe	r 10, 200 Ionth	-3 Day	Ye	
Residence:	Nakai-ma		Kanag	Day Day	Japa	
COSIGCITOC.	City			Province		ountry
Citizenship:	-1.,	Japan	2.a.c 01			<i>j</i>
Post Office Add	· · · · · · · · · · · · · · · · · · ·					
ssert complete mailing dress, including country)  Ashigarakami-gun, Kanagawa, Japan						
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IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "×" HERE ■

<sup>\*</sup>This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

## PAGE 2 OF U.S.A. DECLARATION FORM

Typewritten Full Name of Second Joint inventor		Chikara		MANABE					
of Second Joint inventor:		Given Name	Middle Initial	Family Name					
**Inventor's Signature	•	Wilsan	Window Hittian	Mandae.					
**Date of Signature:		November 1	0: 2003	C lange.					
Date of Signature.		Month	Day	Year					
Residence:	Nakai-mach	ni	Kanagawa	Japan					
	City		State of Province	Country					
Citizenship:		Japan							
Post Office Address:		c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi,							
(Insert Complete mailing address, including country)		Ashigarakami-gun, Kanagawa, Japan							
Typewritten Full Name	;	***		**********					
of Third Joint inventor:		Hiroyuki	26.111	WATANABE					
**T		Given Name	Middle Initial	Family Name					
**Inventor's Signature		Mirry Li		Warde					
**Date of Signature:			er 10, 2003	Year					
Residence:	Nakai-mach	2.2022	Day Kanagawa	Japan					
Residence.	City		State of Province	Country					
Citizenship:	City	Japan	State of Frontier	Country					
Post Office Address:			., Ltd., 430, Sakai, Nal	kai-machi					
(Insert Complete mailing address, including country)		Ashigarakami-gun, Kanagawa, Japan							
address, nichdang country)		Tibingarananin gan	, italiagawa, bapan						
Typewritten Full Name			•						
of Fourth Joint inventor		Hirotsugu		KASHIMURA					
*		Given Name	Middle Initial	Family Name					
**Inventor's Signature	: '	H: 25184911		[ashimula]					
**Date of Signature:			vember 10, 2003						
	Malasi aasal	Month	Day	Year					
Residence:	Nakai-mach	11	Kanagawa State of Province	Japan					
Citizanahini	City	Ianan	State of Province	Country					
Citizenship:		Japan							
Post Office Address: (Insert Complete mailing		c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi, Ashigarakami-gun, Kanagawa, Japan							
address, including country)		Asingarakami-gun	i, Kanagawa, Japan						
Transcription Full Money	,								
Typewritten Full Name of Fifth Joint inventor:	;	Masaaki		SHIMIZU					
		Given Marme	/ Middle-Initial	Family Name					
**Inventor's Signature:		Mason							
**Date of Signature:		Novembe	er 10, 2003						
C		Month	Day	Year					
Residence:	Nakai-machi		Kanagawa	Japan					
	City		State of Province	Country					
Citizenship:		Japan							
Post Office Address:			., Ltd., 430, Sakai, Nal	kai-machi,					
address, including country)		Ashigarakami-gun, Kanagawa, Japan							

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.